



## Town of Lamoine

### Returnable Containers Program Application

Organization's Name			
Describe Affiliation with Town of Lamoine			
Tax ID #			
Is this organization a non-profit entity?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If "NO" is this program affiliated with a non-profit entity?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If "YES", the name of the parent organization			
Contact Person:			
Contact Address:			
Contact Phone Number(s)			
What will the funds raised by this program be used for?			
Signature of Person submitting application:			
Title:	Date Signed:		

For Lamoine Town Office Use Only:

Date Received at Town Office					
Date Considered by Selectmen					
Approved?					<input type="checkbox"/> Yes <input type="checkbox"/> No
Month Assigned for Proceeds					
Followup: Amount Received from Redemption Center					
Warrant		Voucher		Check #	

*By signing this application, the person above named indicates they have read and understand the Returnable Containers Program of the Town Of Lamoine. Completed applications should be returned to the Lamoine Town Hall, 606 Douglas Hwy., Lamoine, ME 04605.*